



City of Rochester
Building Safety Department
2122 Campus Dr SE, Suite 300
Rochester MN 55904-4744
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www.rochestermn.gov

DEMOLITION Permit Application

Office Use Only (3/05)

App. No.

Date	Tenant/Building Name			
Site Address	Number	Street	Suite/Unit No.	
Subdivision and/or Addition		Block	Lot	Plat
Applicant is: • Owner • Contractor • Other (describe)				
Owner	Name Last First MI		Phone ()	
	Address			
	City State		Zip Code	
Contractor	Company		Phone ()	
	Name Last First MI		Roch. Contr. No.	
	Address			
	City State		Zip Code	
Type of Structure	• Residential • Commercial • Garage			
Permit Type	• R645 (1-family dwelling) • R647 (3 & 4-unit building) • R649 (all other structures) • R646 (2-family dwelling) • R648 (5+ units building)			
Other Information	Description of Work _____ Number of dwelling units _____ Total Valuation of Work \$ _____ NOTE: A zoning fee of \$42 and permit fee based on valuation will be collected.			

I hereby apply for a building permit, and I certify that the information above is complete and accurate. The work will be in conformance with applicable laws of the State of Minnesota and ordinances of the City of Rochester, including City Sales and Use Tax Ordinance 129.25. I understand this is not a permit but only an application for a permit, and work is not to start without a permit. I certify that the work will be in accordance with all permit conditions.

Applicant's Signature

Date

Structures without utilities do not need to complete the items in this box.

DEPARTMENT REVIEWS: [These must be signed off before Zoning and Building Safety sign off.]

RPU Electric Division Comments _____

Signature _____ Date _____

RPU Water Division Comments _____

Signature _____ Date _____

Rochester Public Works Comments _____

Signature _____ Date _____

Aquila (gas company) Comments _____

Signature _____ Date _____

Well & Septic (Planning Dept) Comments _____

Signature _____ Date _____

NOTE: There may be a separate charge for well & septic inspection.
This fee is collected at the Rochester-Olmsted Planning Department.

ZONING REVIEW COMMENTS

- | | | |
|--------------------------|-----------------|---------------------------|
| • Site Plan | Zoning District | Flood Protection Required |
| • Surveyor's Certificate | Flood District | Flood Protection Elev. |

Comments:

Final Zoning Review Required • Yes • No

Zoning Approved by:

Date:

Comments:

Permit Approved by:

Date: